

Revised Wis. Admin. Code ch. DHS 75 Implementation

Webinar Series: Session 2

Levels of Care

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WISCONSIN DEPARTMENT
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Revised Wis. Admin. Code ch. DHS 75

Nothing stated during this webinar series is intended to interpret administrative rule language. The information provided in today's presentation and subsequent presentations is intended to assist providers with understanding the revised rule and should not be construed as legal interpretation.

Any formal guidance issued regarding the rule will be identified as such and will follow the approved process.

Level of Care Structure in Revised Rule



- Prevention services
- Intervention services
- Outpatient services
- Intensive outpatient services
- Day treatment services
- Residential services
- Inpatient services

- Withdrawal management levels of care
- Opioid treatment services

American Society of Addiction Medicine (ASAM) Levels of Care

The ASAM Criteria is the most widely used set of guidelines for placement, continued stay, and transfer/discharge of patients with addiction and co-occurring conditions.

Why use the ASAM criteria?

To evaluate patient needs on an ongoing basis:

- To determine appropriate level of care
- To individualize treatment
- To create a treatment plan that is client- and outcome-driven
- To meet insurance requirements for reimbursement
- To use the same language

Insurance companies have frequently used *The ASAM Criteria* to approve level of care and transfer

Withdrawal Management Services for Dimension

- 1-WM - Ambulatory Withdrawal Management without Extended On-site Monitoring
- 2-WM - Ambulatory Withdrawal Management with Extended On-Site Monitoring
- 3.2-WM - Clinically-Managed Residential Withdrawal Management
- 3.7-WM - Medically-Monitored Inpatient Withdrawal Management
- 4-WM - Medically-Managed Inpatient Withdrawal Management

Level 0.5 and Opioid Treatment Services

- **Level 0.5: Early intervention services** - Individuals with problems or risk factors related to substance use, but for whom an immediate substance-related disorder cannot be confirmed.
- **Opioid treatment services (OTS)** - Opioid treatment program (OTP) = agonist medication, methadone
- **Office-based opioid treatment (OBOT)** - buprenorphine and antagonist medications (naltrexone)

ASAM Levels of Care

1 Outpatient treatment

Less than 9 hours of service/week (adults); less than 6 hours/week (adolescents) for recovery or motivational enhancement therapies/strategies

2.1 Intensive outpatient and partial hospitalization

Nine or more hours of service/week (adults); 6 or more hours/week (adolescents) to treat multidimensional instability

2.5 Partial hospitalization/day treatment

Twenty or more hours of service/week for multidimensional instability not requiring 24-hour care

ASAM Levels of Care - Residential

3.1 Clinically Managed Low-intensity Residential

24-hour structure with available trained personnel; at least 5 hours of clinical service/week

3.3 Clinically Managed Population-specific High-intensity Residential

24-hour structure with available trained personnel; at least 5 hours of clinical service/week

3.5 Clinically Managed High-intensity Residential

24-hour care with trained counselors to stabilize multidimensional imminent danger and prepare for outpatient treatment; able to tolerate and use full active milieu or therapeutic community

ASAM Levels of Care – Inpatient Treatment

3.7 Medically Monitored Intensive Inpatient

24-hour nursing care with physician availability for significant problems in Dimensions 1, 2, or 3; 16-hour/day counselor ability

4 Medically Managed Intensive Inpatient

24-hour nursing care and daily physician care for severe, unstable problems in Dimensions 1, 2, or 3; counseling available to engage patient in treatment

Co-Occurring Enhanced

Co-occurring enhanced programs are “special programs” designed to routinely (as opposed to occasionally) deal with patients who have mental health or cognitive conditions that are more acute or associated with more serious disabilities.

Current DHS 75 and Revised DHS 75 Levels of Care Crosswalk

Current Wis. Admin. Code ch. DHS 75	ASAM Level of Care	Revised Wis. Admin. Code ch. DHS 75
DHS 75.04 Prevention Service		DHS 75.14 Prevention Service
DHS 75.16 Intervention Service	Level 0.5 Early Intervention	DHS 75.15 Intervention Service and Intoxicated Driver Services
DHS 75.13 Outpatient Treatment Service	Level 1 Outpatient Services	DHS 75.49 Outpatient Substance Use Treatment Service
	Level 1 Outpatient Services, Co-Occurring Enhanced	DHS 75.50 Outpatient Integrated Behavioral Health Treatment Service
	Level 2.1 Intensive Outpatient Services	DHS 75.51 Intensive Outpatient Treatment Service
DHS 75.12 Day Treatment Service	Level 2.5 Partial Hospitalization Services or Day Treatment	DHS 75.52 Day Treatment or Partial Hospitalization Treatment Service
DHS 75.14 Transitional Residential Treatment Service	Level 3.1 Clinically-Managed Low Intensity Residential Services	DHS 75.53 Transitional Residential Treatment Service
DHS 75.11 Medically Monitored Treatment Service	Level 3.5 Clinically-Managed Medium Intensity Residential Services	DHS 75.54 Medically Monitored Residential Treatment Service
DHS 75.10 Medically Managed Inpatient Treatment Service	Level 4.0 Medically-Managed Intensive Inpatient Services	DHS 75.55 Medically Managed Inpatient Treatment Service
DHS 75.05 Emergency Outpatient Service		

Current DHS 75 and Revised DHS 75 Levels of Care Crosswalk

Current Wis. Admin. Code ch. DHS 75	ASAM Level of Care	Revised Wis. Admin. Code ch. DHS 75
DHS 75.08 Ambulatory Detoxification Service	Level 1-Withdrawal Management Ambulatory Withdrawal Management without Extended On-Site Monitoring	
DHS 75.09 Residential Intoxication Monitoring Service	Level 3.2- Withdrawal Management Clinically-Managed Residential Withdrawal Management	DHS 75.58 Residential Intoxication Monitoring Service
DHS 75.07 Medically Monitored Residential Detoxification	Level 3.7- Withdrawal Management Medically-Monitored Inpatient Withdrawal Management	DHS 75.57 Residential Withdrawal Management Service
	Level 3.7- Withdrawal Management Medically-Monitored Inpatient Withdrawal Management, Co-occurring Enhanced	DHS 75.56 Adult Residential Integrated Behavioral Health Stabilization Service
DHS 75.06 Medically Managed Inpatient Detoxification	Level 4- Withdrawal Management Medically-Managed Intensive Inpatient Withdrawal Management	
DHS 75.15 Narcotic Treatment Service for Opiate Addiction	Opioid Treatment Services	DHS 75.59 Opioid Treatment Program
	Opioid Treatment Services	DHS 75.60 Office-Based Opioid Treatment Service

Full document available at: <https://www.dhs.wisconsin.gov/rules/dhs75-implementation.htm>

Treatment Service General Requirements

DHS 75.23 Service levels of care

(1) SERVICE LEVELS OF CARE.

(a) Services delivered under this chapter shall adhere to standardized levels of care as defined in this chapter. A service shall apply the ASAM criteria or other department-approved placement criteria to determine the appropriate level of care, and services shall be delivered consistent with that level of care.

(b) A service shall not deliver or purport to deliver a service for which they do not possess certification by the department under this chapter.

Treatment Service General Requirements

DHS 75.23 Service levels of care

(2) USE OF ASAM OR OTHER DEPARTMENT-APPROVED PLACEMENT CRITERIA.

(a) A service shall utilize ASAM placement criteria or other department-approved placement criteria to determine the level of care that is matched to a patient's needs and risk level.

(b) In order to be approved by the department, other placement criteria must include all of the following:

1. A multi-dimensional assessment tool that captures behavioral health, physical health, readiness for change, social risk levels and directly correlates risk level to service levels of care based on frequency and intensity of the service.
2. Proof that the criteria is accepted and utilized within professional organizations in the field of healthcare and allows for consistency of interpretation across settings and providers.

Treatment Service General Requirements

DHS 75.23 Service levels of care

(3) LEVEL OF CARE TRANSFER.

A service that offers more than one level of care under this chapter shall identify in the clinical record which level of care the patient is receiving based on the clinical assessment. When a level of care transfer is completed as indicated by assessment or treatment plan review, the service shall document the level of care transfer in the record and shall thereafter meet the service requirements for the indicated level of care.

(4) CONCURRENT SERVICES.

(a) If a patient is receiving services in more than one level of care at a given time, the service shall adhere to all applicable standards for each level of care, and to the level of care standard with the highest requirement when more than one apply.

(b) If a patient is receiving services in more than one level of care at a given time, the patient shall be listed on a roster or patient list for each level of care in which they receive services.

Service Requirements by Level of Care

In addition to the general requirements for all services, the following requirements are outlined in tables based on each level of care:

- Frequency of the service
- Personnel requirements
- Intake, assessment, and treatment planning requirements
- Clinical staffing requirements
- Discharge requirements
- Other operational requirements

Subchapter VI: Additional Requirements for Treatment Service Levels of Care

DHS 75.47 Applicability of other requirements

(1) RELATIONSHIP TO TREATMENT SERVICE GENERAL REQUIREMENTS.

The requirements for a treatment service provided in subch. IV apply to this subchapter as the minimum standards for any service in this subchapter. If a requirement in any section of this subchapter is inconsistent with, or poses a more restrictive standard than a similar provision in subch. IV, the requirement is this subchapter shall control.

(2) RELATIONSHIP TO RESIDENTIAL SERVICE FACILITY REQUIREMENTS.

The requirements for a residential treatment service provided in subch. V apply to this subchapter as the minimum standards for residential services under this subchapter. If a requirement regarding any residential services in this subchapter is inconsistent with, or poses a more restrictive standard than a similar provision in subch. V, the requirement is this subchapter shall control.

DHS 75.48 Service Requirements by Level of Care Tables

- Table 75.48 (1) establishes additional requirements for outpatient levels of care.
- Table 75.48 (2) establishes additional requirements for residential levels of care.
- Table 75.48 (3) establishes additional requirements for residential withdrawal management levels of care.

Level of Care Subsections

Example: DHS 75.49 Outpatient substance use treatment service

In this section, “outpatient substance use treatment service” means a non-residential treatment service totaling less than 9 hours of treatment services per patient per week for adults and less than 6 hours of treatment services per patient per week for minors, in which substance use treatment personnel provide screening, assessment, and treatment for substance use disorders. Outpatient substance use treatment services may include intake, evaluation and diagnosis, medication management, nursing services, case management, drug testing, counseling, individual therapy, group therapy, family therapy, psychoeducation, vocational services, peer support services, recovery coaching, outreach activities, and recovery support services to ameliorate symptoms and restore effective functioning.

Level of Care Subsections

Example: DHS 75.54 Medically monitored residential treatment service

In this section, “medically monitored residential treatment service” means a residential substance use treatment service totaling 20 or more hours of treatment services per patient per week, in which substance use and mental health treatment personnel provide assessment and treatment for substance use disorders and co-occurring mental health disorders, under the oversight of a medical director. Medically monitored residential treatment services may include screening, intake, evaluation and diagnosis, medication management, nursing services, case management, drug testing, counseling, individual therapy, group therapy, family therapy, psychoeducation, vocational services, peer support services, recovery coaching, outreach activities, and recovery support services, to ameliorate symptoms and restore effective functioning. Medically monitored residential treatment services are delivered in a 24-hour clinical residential setting. This level of care is appropriate for patients who require a 24-hour supportive treatment environment to develop sufficient recovery skills and address functional limitations to prevent imminent relapse or dangerous substance use.

Level of Care Subsections

Example: DHS 75.49 Outpatient substance use treatment service

(2) LOCATION OF SERVICE DELIVERY.

(a) An outpatient substance use treatment service may provide services at one or more offices. If a service provides outpatient substance use treatment services at more than one office, all of the following shall apply:

1. The service shall designate one office as its main office.
2. All notices under this chapter will be sent to the main office.
3. Each office providing the service shall comply with the applicable requirements of this chapter.
4. The service shall adopt written policies and procedures to ensure that the service director is able to carry out the oversight and other responsibilities specified under s. DHS 75.18 (1) with respect to all other offices.

(b) A service may provide outpatient substance use treatment services in the community or other locations, provided all requirements of this chapter are able to be met in the setting.

Level of Care Subsections

Example: DHS 75.49 Outpatient substance use treatment service

(2) LOCATION OF SERVICE DELIVERY.

(c) A service that provides outpatient substance use treatment services in the community shall have written policies and procedures for community-based service delivery.

(d) A service that provides outpatient substance use treatment services in the community shall provide annual training for all staff that deliver services in the community regarding in-home and community safety, and avoiding sexual or other exploitative relationships with patients. A record of each training shall be available to the department upon request.

Level of Care Subsections

Example: DHS 75.56 Adult residential integrated behavioral health stabilization service

(3) ADDITIONAL INTAKE AND ADMISSION REQUIREMENTS.

(a) An adult residential integrated behavioral health stabilization service shall have written policies and procedures for the assessment of safety and consideration of safety risks to the patient and others prior to admitting a patient.

(b) An individual with any of the following symptoms, behaviors, or concerns shall be excluded from admission to an adult residential integrated behavioral health stabilization service:

1. Assaultive ideation or assaultive behaviors combined with likelihood to act on those behaviors.
2. Exhibiting active self-injurious behavior.
3. A recent suicide attempt or ongoing suicidal ideation combined with a continued threat or plan to act on suicidal ideation.

(c) The intake screening shall include documentation of the determination and plan for the level of observation needed to address the patient's needs and any safety concerns.

DHS 75 Revision Webinar Series: Session 3

January 14, 2022: Treatment Service General Requirements (Subchapter IV)